ADDRESS CHANGE NOTICE

Wisconsin Department of Transportation MV3058 8/2008 s.343.22 Wis. Stats.

- Use this form for no more than 2 individuals at the same address. Use additional forms if more space is needed.
- Indicate ALL driver licenses, ID cards, and disabled $\,$ parking ID cards for which we should change your address. ALL will be updated at the same time.
- This form cannot be used if you have changed your name or if you hold a commercial driver license. In those cases, you must obtain a duplicate driver license at a DMV Service Center. A fee is required.
- Your vehicle records will be updated via a United States Postal Service notification process. Please contact your local post office if you have had a change of address.
- Your vehicle registration notice will be mailed to your most recent address on file with the United States Postal Service.

Mail to: Division of Motor Vehicles
Wisconsin Department of Transportation

PO Box 7983

Madison, WI 53707-7983

Please print.

1 st Person	Driver License or Identification Card Number	Disabled Parking ID Card N	lumber
	Name - As Shown on Driver License or Identification Card	Birth Date	Area Code - Telephone Number - Daytime
2 nd Person	Driver License or Identification Card Number	Disabled Parking ID Card Number	
	Name - As Shown on Driver License or Identification Card	Birth Date	Area Code - Telephone Number - Daytime
OLD	Street Address		
	City	ZIP Code	County
NEW	Street Address		
	City	ZIP Code	County